



# **Annual Report**

## **Fiscal Year 2000-2001**

## Current Status and Strategic Directions

### 1. 0 – 5 Child Population:

11,637

### 2. Ethnicity of Children 0 – 5:

[Latino, 2363; White, 7579; Asian, 595; Pacific Islander 20; African American 204; American Indian and Alaskan 274; Other 19; Multiple Races 583]

### 3. County Narrative:

a. The Butte County Children & Families Commission Strategic Plan addressed the cultural, ethnic, linguistic, socio-economic, and special needs child population by conducting a thorough needs assessment prior to completion (November 17, 2000). This included a broad range of community input on the child population in Butte County. The Commission has generated a great deal of enthusiasm in the county regarding Prop 10 and is open and responsive to community needs.

b. Butte County is located in the northeastern Sacramento Valley, with a population of approximately 200,000 residents. It encompasses 1,049,340 acres of land, 42% of which is farmland. It is a largely rural county with suburban areas integrated throughout. It has large areas of sparse population and somewhat limited industry. Historically it is rich in agriculture including nut, rice, olive, prune, peach, and kiwi production. The county is diverse in its landscapes, the western edge bordered by the Sacramento River and the eastern boundary nestled in the lower foothills of the Sierra Nevada Mountain Range. Two major rivers and their forks carve the valley into geographically separate areas with differing climates, recreational activities and terrain. The county is characterized by cultural diversity and offers opportunities for cultural enrichment, recreation and relaxation in a non-congested, rural environment. There are five municipalities including 4 incorporated cities and one town in Butte County. These include Biggs, Chico, Gridley, Oroville and Paradise with the remainder of the population (51%) residing in unincorporated land.

c. Pregnant women in Butte County continue to access prenatal care later than recommended and there is only one county in California with a higher rate of infant mortality. Our young children face the difficult task of accessing medical and dental care due to lack of insurance or the number of providers who will accept families' payment source. In addition to the physical component of health, there is a tremendous need for services to assess and provide intervention to address their emotional, developmental and environmental needs. Parent's use of tobacco, alcohol and drugs, along with the prevalence of environmental pollutants negatively impact children's development and overall health.

Immunizations are one component to disease and injury prevention. Quality of environment and exposure to substances and pollutants are also related. In Butte County, 24% of women enrolled in the WIC program smoke cigarettes. Forty-four percent (44%) of the children served through this program are exposed to environmental tobacco smoke (ETS). It follows that Butte County infants, children, and pregnant woman are at increased risk of tobacco-related illness or death due to exposure to ETS in the home, before or after birth. Unintentional injury is a leading cause of death and hospitalization for children, ages 1-5 years. Research estimates that as many as 90 percent of unintentional injuries are preventable.

Dental health and related services is another significant need of Butte County families. Dental screenings conducted in Northern Sacramento Valley Rural Counties revealed that one third to one half of elementary school children were in need of dental treatment. Forty two percent (42%) of parents surveyed identified that securing a service provider was a barrier even if they had a payment source. . In

Butte County, there are 121 practicing dentists, 5 accepting any Medi-Cal as a payment source, and one Board-certified Pedodontist.

Access to medical insurance is an ongoing issue for Butte County families. In April of 1999 there were 40,578 Medi-Cal participants, 5,912 between the ages of 0-5. Healthy Families provides health insurance for families at 200% of the federal poverty level and has 1,900 Butte County families enrolled.

The earliest years are the foundation for children's positive growth and development. Issues impacting children's potential include including low birth weight, early access to prenatal care, teen birth rate and infant mortality. In 1998, less than 73% of pregnant women received first trimester prenatal care. Only 61% of Medi-Cal clients received these critical services. Children with developmental disabilities and special needs receive a variety of early intervention services in Butte County. There are 117 children ages 0 to 3, and 97 ages 4 and 5 receiving diverse services based on their condition or need.

The California Now, CA Report Card '99 describes the well being of children in terms of eight ranked indicators. Fifty percent (50%) of young children in California live in the ten counties ranking lowest in young children's well being. Butte County is identified as one of these ten counties.

The Children Now – California County Data Book '99, indicates that Butte County has high rates of child abuse reports and children in foster care. In 1998, 6,802 investigations were initiated in Butte County based on reports of child abuse, and the rate of this abuse was 141.5 per 1,000 children younger than 18. Although the number of children abused and/or neglected decreased by 23% in 1998, this issue continues to negatively impact families of Butte County.

Research shows that children exposed to alcohol and drugs prior to birth are 2 to 3 times more likely to be abused than others are. Since 1992, approximately 600 children aged 0-3 have been identified as substance exposed and placed in foster care. Another significant issue, which impacts children's health, overall development and well being, is family violence. In 1996, approximately 1,600 reports of family violence were made to law enforcement agencies. In Butte County, a variety of organizations are working to positively impact this critical issue.

Out-of-home placement is a significant issue being addressed through integrated approaches. The 1999 out-of-home placement caseload was 677. Nearly one-third of the foster care caseload is addressed through kinship home care, according to the CA Children's Services Archive. This care, provided by family members to children removed from the care of their primary parents, is a growing alternative to other foster care options.

Childcare and development services are integral to the health and well being of Butte County's children and families, and its expanding infrastructure. Research has linked school readiness and later school success to quality early care and education experiences. Children enrolled in these programs have been found to have better peer relations, emotional adjustment, grades, and behavior in school. Recent brain research confirms that caregiving during the early years affects brain functioning and how a child will behave, learn, feel and perform. Ensuring available, affordable, quality early care and education has never been more critical.

Families in Butte County face a number of challenges related to early care and education. The limited availability, accessibility and affordability of quality care impacts families' ability to maintain economic stability. Ongoing parental requests for referrals to child care and development programs demonstrate a significant need. The Butte County Local Child Care Planning Council 1999 Needs Assessment identified that 7,750 of Butte County's 15,000 children 5 years and under, are in need of childcare due to parental working status.

Barriers to accessing early care and education vary throughout the county. Limited transportation services in some areas decrease parents capacity to get their children to available programs. Additionally, Butte County similar to many areas in California, experiences a shortage of early care and education facilities which can house quality programs.

The supply of licensed childcare does not begin to meet the demand. In 1998, there were 4,507 licensed childcare positions provided by 239 family childcare homes and 55 centers in Butte County.

When supply and need are compared, more than 3,000 children are without early care and education. Cost is another barrier limiting access to child development programs. For a family at minimum wage, infant care would cost 31% of the family's income. In Butte County, publicly funded, subsidized services are in great demand. Eligibility for childcare subsidies is based on 75% of the state median income level. Families above this level are not eligible for subsidies and absorb the cost burden of these necessary services.

Parents have diverse early care and education needs. There are 214 children with identified special needs who require integrated services. Fifteen children per month are referred for early intervention services to assess a suspected condition. Respite care is an important service for families with special needs children. Of 214 identified children, 112 receive respite care to support parent and child. In Butte County there is neither a crisis program nor 24-hour care available.

Specialized service delivery is a challenge for the early care and education field. According to the 1999 California Child Care Portfolio, many parents work night and weekend shifts and their schedules vary weekly. Only 11% of family childcare homes offer care during available during non-traditional hours. Parents requiring after hours care are often forced to rely on licensed exempt care. Barriers limiting families' access to services include transportation and childcare accessibility and availability issues. The additional childcare demand created by CalWORKs implementation has impacted the early care and education availability. Approximately 60% of the subsidized childcare utilized by the CalWORKs population are licensed exempt. Licensed exempt care accommodates parental choice and varying needs, but has limited regulation. The migrant population also has diverse early care and education needs that vary throughout the year. Butte County's 2,172 seasonal workers have approximately 500 children aged 0-5. Forty two percent (42%) of these children need early care and education services.

Research has determined that the quality of care received by young children impacts their growth, development and learning potential. The growing body of research identifies that consistent, sensitive, well trained and fairly compensated providers are central to quality service provision. Like most counties in California, Butte County experiences lack of qualified staff, low wages, high turn over and few opportunities for professional advancement. This in turn creates problems in securing and maintaining consistent and qualified caregivers.

Children need safe, enriching environments and quality, consistent care giving in order to realize their full developmental potential. The issues presented here limit the overall development and learning potential of Butte County children.

**d.** Thirty mini-grants were awarded for the total amount of \$977,272, which addressed all focus areas identified in the Strategic Plan.

**e.** The Commission provided a very inclusive process in developing their Strategic Plan. This made it possible for stakeholders to address solutions for the issues identified in the Strategic Plan during the formal contract awards process. In this elemental way, the community stakeholders drove the initial prioritization of the Strategic Plan's goals and objectives during the 2000/2001 fiscal year.

#### **4. Major Accomplishments:**

The Butte County Children & Families Commission considers completion of their initial Strategic Plan the major accomplishment for the 2000/2001 fiscal year. This allowed for disbursements of Prop 10 funding at the local level through the formal contract awards process. Completion of the Strategic Plan involved accomplishments in civic engagement, public education, development of a local funding process, and development of monitoring funded projects.

In the spring of 2001, Butte County Children and Families Commission funded a survey entitled "*Child Care and Development Workforce Study*" for the purpose of planning and engaging in the

State Commission's 2<sup>nd</sup> round matching fund opportunity for compensation/ retention incentives for early care and education providers.

The Commission also issued their first round of 30 mini-grant contracts toward the end of 2001 fiscal reporting year.

## **5. Status of Reporting and Data Collection:**

DETERMINING HOW BEST TO HELP FAMILIES REQUIRES GOOD INFORMATION ABOUT THEIR NEEDS. COUNTY DATA ABOUT THE FOLLOWING ISSUES RELATED TO THE STATUS OF YOUNG CHILDREN IS NOT AVAILABLE, AND YET ARE ESSENTIAL TO FUTURE PLANNING. THE ABSENT DATA, AMONG OTHER ISSUES INCLUDE:

THE NUMBER OF CHILDREN WAITING FOR CHILD CARE, AVAILABILITY OF HIGH QUALITY, AFFORDABLE CHILD CARE, CHILDREN WITHOUT HEALTH INSURANCE, TODDLERS FULLY IMMUNIZED, CHILDREN'S DENTAL HEALTH, DEVELOPMENTAL DELAYS AND PREVALENT CONDITIONS FOR YOUNG CHILDREN, NUMBER OF LEAD POISONED YOUNG CHILDREN, CHILDREN'S HOUSING STATUS AND CONDITIONS, PARENT EDUCATION LEVELS AND EMPLOYMENT STATUS AND RATES OF CHILD ABUSE OF YOUNG CHILDREN.

There are numerous issues that impact the ability of Butte County children to be safe, healthy, and ready to learn. The Strategic Plan provides a snapshot of the circumstances affecting our children. It is evident to the Commission that there is a need for a more comprehensive picture that reflects the state of young children in our county. The Commission will endeavor to develop a Report Card that will include a thorough review of the existing data and resources regarding young children and their families. The Commission hopes that this Report Card will provide the basis to evaluate the effectiveness of early child development strategies and programs.

The Commission hopes to build upon existing knowledge and address unmet needs. In the Strategic Plan, \$720,000 is allocated for the purpose of developing reporting data collection efforts for strategies, results and indicators, and evaluation activities aside from results and indicators.

## **Summary of Innovative and Promising Practices**

### **1. Program Highlights:**

The Commission issued their first round of mini-grant contracts at the end of this fiscal reporting year; therefore promising results are not evident to date.

### **2. Service Integration and Collaboration:**

The Butte County Children & Families Commission voted to participate in the State Commission's second round of matching funds opportunity for compensation/retention incentives for early care and education providers. It is the intent of the Commission to use this initiative as a medium for promoting interagency collaboration. This initiative entitled *Project REWARD* is a product of Butte County Children & Families Commission's commitment to collaboration. Many of the local child care organizations and related agencies in the county participated in planning and are willing to provide in-kind services related to training and evaluation activities. The collaborative partners share an intense interest in *Project REWARD* and its purposes. They were involved in the application design. They are involved in implementation and coordination. They are committed to its success. This project addresses the objectives identified in the Strategic Plan related to increasing the number of qualified providers of early care and education and increasing the level of professional development, retention, and proficiency of child care providers in Butte County.

## County Revenues and Expenditures for the period July 1, 2000- June 30, 2001

### ***County Revenues***

| <b>Prop 10 Cash Revenues</b>  | <b>List dollar amounts here.<br/>Round to whole dollars</b> |
|---|---|
| <b>Prop 10 Allocation</b><br><i>Monthly disbursements</i>                           | \$ 2,196,020  |
| <b>Augmentation Funds from the State Commission:</b>                                |   |
| • Administrative Augmentation Funds   | \$ 3,227  |
| • Travel Augmentation Funds   | \$ 3,563  |
| • Minimum \$200,000 augmentation funds  | \$  |
| <b>Other State Prop 10 Program Funding</b><br><i>Grant funds, state initiatives</i> |   |
| • Child Care Retention Incentives   | \$  |
| • Other (specify)   | \$  |
| <b>Revenues from Sources Other than Prop 10</b>                                     |   |
| List:   | \$  |
|   | \$  |
|   | \$  |
| <b>Interest Earned and Balance Brought Forward</b>                                  |   |
| Interest Earned   | \$ 235,770  |
| Fund Balance brought forward from prior year(s)                                     | \$ 3,370,650  |
| <b>Total Cash Revenue</b>   | <b>\$ 5,809,230</b>   |

### ***Annual Expenditures and Encumbrances***

|  | <b>Expended or Encumbered for FY 00-01</b> |
|--|--|
| Program Expenditures and Encumbrances (e.g. grants, initiatives, programs)   | \$ 934,972                                 |
| Implementation Expenditures and Encumbrances (all expenditures/encumbrances other than program expenditures – see detail on next page) | \$ 118,219                                 |
| <b>Total Cash Expenditures</b>   | <b>\$1,053,191</b>                         |

## Financial Summary

|  | July 1, 2000 to June 30, 2001 |
|--|-------------------------------|
| Total Cash Revenue   | \$ 5,809,230                  |
| Total Cash Expenditures  | \$ 1,053,191                  |
| <b>Fund Balance</b>  | <b>\$ 4,756,039</b>           |
| * Fund Balance that is not encumbered, but is committed or set-aside for current or future grants, initiatives, sustainability reserve, etc. | \$ 3,831,745                  |
| Fund Balance Uncommitted   | \$ 924,294                    |

\*Committed funds in this section are not encumbered for this fiscal year and will not show up in the fiscal audit.

## Implementation Expenditure Detail

In this section you have the opportunity to report details of the implementation expenditures reported in the previous section. In the third column, check if the amount reported is based on accounting or best estimate. See glossary for expanded description of expenditure categories.

|   | Expended or Encumbered for FY 00-01 | Based on accounting or best estimate:  |
|---|-------------------------------------|--|
| <b>Evaluation Expenditures</b>  | \$ 0                                | <input type="checkbox"/> Accounting<br><input type="checkbox"/> Best Estimate              |
| <b>Administrative Expenditures</b> <ul style="list-style-type: none"> <li>Commission Operations and Support (meeting costs and support, office operations, training and technical assistance, development of policies and procedures, etc.)</li> <li>Grant-Making Operations and other Fund Allocations</li> <li>Contract Management</li> <li>Fiscal Management</li> <li>Tracking of and Compliance with Legal Requirements, including preparing reports to the State Commission</li> </ul> | \$68,219                            | <input type="checkbox"/> Accounting<br><input checked="" type="checkbox"/> Best Estimate   |
| <b>Planning, Communication and Outreach Expenditures</b> <ul style="list-style-type: none"> <li>Strategic Planning</li> <li>Community Outreach (media, websites, other community outreach, civic engagement)</li> <li>State-level Involvement, Communication, and Planning for State-Level Initiatives</li> <li>Activities to Promote Collaboration and Integration of Services and Leveraging of Resources</li> </ul>  | \$50,000                            | <input type="checkbox"/> Accounting<br><input checked="" type="checkbox"/> X Best Estimate |
| <b>Total Implementation Expenditures</b>  | <b>\$118,219</b>                    |  |

***Tracked In-kind:*** *If your Commission receives in-kind resources and tracks them in the fiscal accounting system (and therefore, they are reflected in the fiscal audit), please describe them here, noting major sources and type of in-kind, as well as the total amount of tracked in-kind*

None.

***Untracked In-kind:*** *If your Commission receives in-kind resources but does not track them in the fiscal accounting system (and therefore, they are not reflected in the audit), please describe them here, noting major sources and type of in-kind.*

Community stakeholders involvement in Strategic Plan includes community meetings, commission meetings, writing portions of plan, graphic designs for pamphlets, and document formatting. In-kind involves approximately 40 hours X's 5 individuals @ 15.00 per hour equaling a total in-kind amount of \$3,000.

***Discussion of Additional Cash Resources:*** *If your Commission activities have brought additional cash resources into your community in the last fiscal year, describe your successes in this regard. How were the funds used, or for what use are they intended?*

None.



*See Appendices following for code keys.*

\_\_\_\_\_

| 1. RESULT AREAS  | FOR EACH RESULT AREA   |   | 4. PARTICIPANTS SERVED |   |   | 5. TOTAL NUMBER OF MONTHS  | 6. TOTAL FUNDS SPENT IN EACH RESULT AREA                                   |  |
|--|--|---|------------------------|---|---|--|--|--|
|  |  |   | A = ACTUAL             | E = ESTIMATE  | D = DUPLICATE   |  |  |  |
| <i>Please mark the result area (s) that apply to this project or group of projects</i>   | 2.Intended Result(s)<br><i>Enter one or more codes from Appendix 1.</i>                | 3. Strategy(ies)<br><i>Enter one or more codes from Appendix 2</i>  |                        | <i>Total children prenatal to 5<sup>th</sup> birthday</i> | <i>Total family members of children prenatal to 5<sup>th</sup> birthday</i> | <i>Total providers that serve children prenatal to 5 or their families</i> | <i>Total months project(s) has/have been in operation during FY 00/01.</i> | <i>Total funds spent on each of the four result areas.</i> |
| X <input type="checkbox"/> Improved Systems(10)  | s1(8); s2(5); s3(4); s4(9); s6(1)  | 1(4); 2, 3(3); 4(2), 5(2), 9(2), 10(7), 11(7), 13, 15(2), 16, 17(2), 22, 42   |                        | NA  | NA  | NA   | < 1  | -0-  |
| X <input type="checkbox"/> Improved Child Health (9)   | h1; h2(3); h3(3); H4(4); h6(3); h7; h9; h10, h11, h12, h13(4)                          | 1(2); 3(3); 5(1); 10(2); 11(2); 13(1); 15(1); 17(1); 23(1); 28(1); 29(1); 32(1); 34(1); 42(1); 54(1); 56(1); 59(2); 65(1); 68(1)  |                        | NA  | NA  | NA   | < 1  | -0-  |
| X <input type="checkbox"/> Improved Child Developme nt (14)  | c1(3); c2(5); c3(4); c4(8); c5(5); c6(4); c8(2)  | 1(2); 3(3); 4(2); 10(4); 11(1); 13(2); 15(1); 16(1); 17(1); 19(5); 29(3); 35(1); 39(4); 42(2); 43(3); 45(3); 46(1); 47(3); 48(3); 50(1); 55(2); 56(2); 59(3); 61(2); 70(1); 71(4)                                   |                        | NA  | NA  | NA   | < 1  | -0-  |
| X <input type="checkbox"/> Improved Family (17) Functioning  | f1(7); f2(11); f3(9); f4(2); f5(5); f6(7); f7(1); f8(2); f9(1); f10(1); f11(7); f12(2) | 1(2); 2(1); 4(1); 5(2); 10(5); 11(1); 13(1); 19(4); 20(1); 22(1); 29(2); 33(1); 34(1); 36(2); 37(2); 38(1); 39(4); 42(1); 43(2); 44(2); 45(2); 53(2); 54(1); 56(3); 57(4); 59(1); 60(1); 65(1); 66(1); 67(1); 68(2) |                        | NA  | NA  | NA   | < 1  | -0-  |
| <b>Note:</b> 1) Each of the 30 Mini-grants were read and coded on separate pages for results and strategies. 2) Listings were then collated by focus areas. For example, 10/30 mini-grants are working on improved systems, 9 on improved child health, 14 on child development, and 17 on family functioning. 3) Finally, all 4 focus areas and strategies and results were combined onto 1 page. |  |   |                        |   |   |  |  |  |

## Appendix 1

### SHORT- AND LONG-TERM INTENDED RESULT CODES

#### *Improved Systems for Families: Integrated, Accessible, Inclusive, and Culturally Appropriate Services*

|     |  |
|-----|--|
| S1  | Increased accessibility of services/activities                       |
| S2  | Improved service delivery  |
| S3  | Increased cultural competence in service provision and/or evaluation |
| S4  | Increased service integration  |
| S5  | Increased accountability for results                                 |
| S6  | Increased civic engagement by program participants                   |
| S7  | Other (specify)  |
| S8  | Other (specify)  |
| S9  | Other (specify)  |
| S10 | Other (specify)  |

#### *Improved Family Functioning: Strong Families*

|     |  |
|-----|--|
| F1  | Parents participate in parent education programs.  |
| F2  | Parents receive increased parent support services.   |
| F3  | Parents are knowledgeable about child development and practice effective parenting skills.   |
| F4  | Families participate in education or training opportunities to improve their economic status.  |
| F5  | Parents provide effective and nurturing newborn and infant care.   |
| F6  | Children are safe in their homes and communities (safe from intentional injury).<br>[Please report prevention of unintentional injuries in Improved Health section.] |
| F7  | Children are in environments free of tobacco and other substance abuse.  |
| F8  | Children will remain with their families.  |
| F9  | Families are self-sufficient in areas targeted by the local initiative.  |
| F10 | Fewer teenagers have babies and more parenting teenagers delay subsequent pregnancies.   |
| F11 | Parents support their child's learning, healthy growth and development.  |
| F12 | Other result (specify):  |

#### *Improved Child Development: Children Learning and Ready for School*

|    |   |
|----|---|
| C1 | Parents are knowledgeable about quality ECE/child care and available options.   |
| C2 | Children, including those with developmental delays and special needs, have access to and receive quality ECE/child care. |
| C3 | ECE/child care providers have increased supports & educational opportunities.   |
| C4 | Children receive -quality ECE/child care and early childhood education programs   |
| C5 | Children live in home environments supportive of optimal cognitive development.   |
| C6 | Children enter kindergarten “ready for school”.   |
| C7 | Children continue to be successful in school.   |
| C8 | Other result (specify):   |

### ***Improved Child Health: Healthy Children***

|     |  |
|-----|--|
| H1  | Expectant mothers have adequate prenatal care.   |
| H2  | Parents are knowledgeable about and practice healthy behavior prior to and during pregnancy.             |
| H3  | Children receive preventive and ongoing regular health care.   |
| H4  | Children receive early screening and early intervention for developmental delays and other special needs |
| H5  | Children receive preventive and ongoing regular mental health.   |
| H6  | Children receive preventive and ongoing oral care.   |
| H7  | Parents are knowledgeable about and provide their children with healthy diets and physical activity.     |
| H8  | Children are born healthy.   |
| H9  | During pregnancy, women refrain from use of tobacco, drugs, and alcohol.                                 |
| H10 | Children have healthy teeth and gums.  |
| H11 | Children are healthy and well nourished.   |
| H12 | Children are free of smoking-related illnesses (e.g., asthma and other ACS).                             |
| H13 | Children are in safe and healthy environments (free from unintentional injuries).                        |
| H14 | Other result (specify):  |

## Appendix 2

### STRATEGY CODES

#### *Service Integration*

- 1 Participating in joint community planning efforts and decisions on revenue maximization and fund allocations
- 2 Signing Memoranda of Understandings with multiple agencies and groups collaborating to provide integrated services (includes facilitating entry into the service system, coordinated service delivery, shared information, and non-duplication of efforts)
- 3 Interdisciplinary training for providers
- 4 Establishing centralized resources, such as registries and databases
- 5 Use of pooled resources to address root causes and community conditions
- 6 Increased Civic Engagement by Program Participants
- 7 Accountability is shared across programs on a countywide basis for agreed upon results
- 8 Other (please specify)

#### *Service Accessibility*

- 9 Making services available for all families through flexible scheduling
- 10 Increasing service capacity in underserved areas and/or among underserved populations
- 11 Developing conveniently located service sites, co-location with other service providers and community-based organizations, or multi-disciplinary home-based services
- 12 Other (please specify)

#### *Serving Diverse Populations*

- 13 Training to service providers regarding serving families and children with special needs
- 14 Cultural diversity training for providers of services to children and families
- 15 Developing and/or expanding types of child and family services available to locally appropriate languages other than English
- 16 Increasing the number of service providers who are ethnically, culturally, and linguistically reflective of their communities
- 17 Developing programs and materials specifically developed for diverse populations (ethnic, cultural, special needs)
- 18 Other (please specify)

#### *Public Engagement*

- 19 Encouraging families to participate in formal and informal community associations
20. Inviting service recipients to participate on policy boards and in program implementation.

21. Other (please specify)

***Individual or Family Focused Activities***

22. Prenatal care
23. Breast feeding assistance
24. Well-baby or well-child check ups
25. Immunizations
26. Health screenings
27. Oral health prevention/screenings
28. Oral health treatment
29. Developmental/cognitive assessments
30. Mental health/behavioral assessments
31. Mental health services
32. Substance abuse screening
33. Substance abuse treatment
34. Short-term support (crisis or walk-in counseling)
35. Mentoring
36. Case management
37. Home visitation \_\_\_\_\_
38. Respite care for children with special needs
39. Information and referral
40. WIC, Food Stamps or food program enrollment/assistance
41. Health insurance enrollment/assistance
42. Transportation services or vouchers
43. General parenting support
44. Teen parent support
45. ECE/child care enrollment assistance (non-monetary)
46. ECE/Child care subsidies or vouchers
47. ECE/child care staff recruitment
48. Provider incentive for training
49. Provider salary augmentation (stipends)
50. Housing/shelter assistance
51. TANF enrollment/assistance
52. Foster parent recruitment
53. Family literacy programs

- 54. Violence prevention/intervention (child/spouse/partner)
- 55. Other (please specify)

***Small Group Focused Activities***

- 56. Parenting classes (on topics such as infant care, nutrition, home safety, discipline, child development)
- 57. Caregiver/parent support groups
- 58. Classes for children
- 59. Provider training or professional development
- 60. Other adult classes (on topics such as literacy or citizenship)
- 61. Parent-Child classes (e.g., mommy and me)
- 62. Provider licensing classes
- 63. Parent/Caregiver job training
- 64. Other (please specify)

***Large Group Focused Activities***

- 65. New Parent kit distribution
- 66. Information dissemination (mailing, distribution of brochures, newsletters, resources)
- 67. Public education campaigns
- 68. Outreach efforts
- 69. Health fairs
- 70. Community events/ celebrations
- 71. Facilities/capital improvements (playgrounds or child care centers)
- 72. Other (please specify)

## Glossary

**Administrative Augmentation** – is any administrative augmentation your commission has received from the State Commission, or has designated as receivable.

**Administrative Expenditures** – include all personnel time, consultant costs and operating costs associated with the day-to-day operations of the Commission. This would include costs associated with planning and implementing Commission meetings, with managing office operations, with provision of training and technical assistance to the Commission and its subcommittees, with development of policies and procedures, with all fund allocation planning and implementation activities including grant-making operations, with contract development and monitoring, with overall budgeting, tracking, management and monitoring of funds in the Children and Families Trust Fund (including efforts to leverage or blend funds) and with ensuring that the Commission is in compliance with all state statutes and local ordinances.

**Allocation** – (please see definition for “Prop 10 Allocation”)

**Civic Engagement** – a broad array of constituencies are involved in governance, especially people with the greatest stake in the results. Civic engagement ensures that people reflecting the diverse perspectives of the kinds of people affected by a decision are involved in making or shaping decisions (i.e., recipients of services, community residents, services providers, policy-makers, funders, etc.) The views and experiences of this broad array of people who make up communities include people of different ethnic groups, class backgrounds, sexual orientations and genders.

**Cultural Competence** – Cultural competency means services, supports, or other assistance that are conducted or provided in a manner that is responsive to the beliefs, interpersonal styles, attitudes, language and behaviors of individuals who are receiving services, and in a manner that has the greatest likelihood of ensuring their maximum participation in the program.

**Encumbrances, Encumbered** – funds that have been committed from the fiscal year budget, but will be used to pay for expenditures after the fiscal year. Funds are often encumbered to pay off the last payment of a contract, to cover purchase orders that will not be submitted until after June 30<sup>th</sup>, to cover late Accounts Payable from that fiscal year, etc. Encumbrances will usually be reported in the fiscal audit as reservations of fund balances rather than expenditures.

**Evaluation** – the consistent, ongoing collection and analysis of information for use in decision-making in implementing programs and assessing their effectiveness. Useful evaluation techniques for county commissions include individual interviews, written surveys, focus groups, observation and analysis of statistical information.

**Evaluation Expenditures** – include all personnel time, consultant costs and operating costs associated with developing evaluation criteria, with developing or acquiring data collection instruments, information systems and other evaluation tools, with activities related to linking the local evaluation strategy with the state evaluation strategy, with providing technical assistance to grantees in the development of an evaluation strategy and with implementing the evaluation reporting and analysis process.

**Expenditures** – the amount of Prop 10 funds that has been spent in a fiscal year.

**Fund Balance** – is the total revenues minus the total expenditures and encumbrances for the fiscal year.

**Fund Balance in Reserve/Committed** – is the amount of funds in your fund balance that have been set-aside or committed by your commission for a specific purpose, such as future grant awards, initiatives, sustainability reserve, etc. These funds have not been encumbered for the fiscal year being reported.

**Fund Balance Brought Forward From Prior Year(s)** – is the beginning balance reflected in the FY '00-'01 Children and Families Trust Fund Account. The balance brought forward could be from the prior year or the prior two years.

**Implementation Expenditures/Encumbrances** – are actual expenditures and encumbrances incurred by the Commission in implementing Commission activities. This line item should include all expenditures and encumbrances that are not directly related to program costs, and will include costs such as administration, evaluation, outreach, strategic planning, etc.

**Improved Service Delivery** – community and local systems working together to make services more accessible and available to children and families. It could also mean increasing the amount of services that are available.

**Improved Service Integration** - This could be co-location of services/systems/programs and blended funding opportunities where several services/systems/programs bring funds and in-kind resources to the table to improve the service delivery systems. Blending a set of interdependent systems into a functioning or unified whole. In the Community approach, schools, communities and government blend their systems to ensure that children and families will be healthier, safer, and more successful in school and economically self-sufficient. This could also include the integration of data across agencies that serve similar populations (health, welfare, education, child care) where all service agencies use the same database to identify clients in the multiple systems.

**Indicator** – a measure used to determine whether programs, services or projects are achieving goals and objectives. For example, the rate of low-birth weight babies helps quantify whether we are getting healthy births or not.

**In-kind-Not Tracked** – resources that are provided to the Commission without charge and are not tracked with a paper trail or reported as in-kind expenditures and revenues on the fiscal reports. For example, if the County Counsel provided legal services but these services were not documented in writing, this service can be described as untracked in-kind.

**In-kind-Tracked** – resources that are provided to the Commission without charge and are tracked with a paper trail and reported as in-kind expenditures and revenues on the fiscal reports (expenditures = revenues). For example, if the County Counsel provided \$2,000 worth of legal services and signed a form detailing those contributions and these were coded into the fiscal reports as in-kind expenditures and revenues, these would be “tracked.”

**Interest** – is all of the interest earned in all of the revenue accounts under the Children and Families Trust fund during the fiscal year.

**Long-term Result** – the behavior/condition a strategy is intended to impact in the long run.

**Minimum \$200,000 Augmentation** – these are any funds your commission received from the State Commission (or has designated as receivable) to provide for a minimum annual allocation.



**Other State Prop 10 Revenue** – is any Prop 10 funds *other than* the monthly disbursements, the minimum allocation of the travel and admin augmentation. These would include funds received through state initiatives (i.e., childcare retention incentives, grants, etc).

**Outcome** – for purposes of Prop 10, please see definition for Result.

**Performance Measures** – measures of how well public and private programs and agencies are working. The most important performance measures tell us whether the clients or customers of the service are better off.

**Planning, Communication and Outreach Expenditures** – include all personnel time, consultant costs and operating costs associated with the annual update of the strategic plan (and with needs assessments and research done to support this annual update), with community outreach including media advertisements, website development and maintenance, linkage with state-wide media efforts and participation in community meetings, forums, coalitions, Board of Supervisor meetings and other public events in planning efforts, with participation in the California Children and Families Association activities and attendance at State Commission meetings, with other county-level and state-level planning activities, with planning for participation in state-level funding initiatives and with local efforts to promote collaboration and integration of services and leveraging of resources.

**Program Expenditures/Encumbrances** – are actual expenditures and encumbrances for grants, initiatives, programs, etc. for the fiscal year being reported.

**Project** – a grantee, a program, or service funded by Prop 10.

**Prop 10 Allocation** – is the monthly disbursement of Prop 10 funds to county commissions during the fiscal year. This amount should include amount received and any amounts designated as receivable.

**Receivables, or funds designated as receivable** – These are funds that have not been deposited into the Children and Families Trust Fund for your county by the end of the fiscal year (June 30, 2001) but are accounted for as “receivables” because they have been disbursed by the state during the fiscal year. For example, some counties use the state’s disbursement schedule to allow them to designate the state’s disbursements as receivables for that same fiscal year, even if they are received after June 30.

**Result** – a condition of well being for children, families, and/or communities. For example, Prop 10 results include: improved child health, improved child development, improved family functioning, and improved systems.

**Revenues From Sources Other Than Prop 10** – is any revenue from sources other than Prop 10 that have been deposited into the Children and Families Trust Fund for your county during the fiscal year. This line item would typically include revenues such as grant funds, county cash contributions, bequests, etc. Report only cash revenues in this line item.

**Short-term Result** – the behavior/condition a strategy is intended to impact in the near future.

**Strategic Objective** – a precise description of desired change that is short-range and measurable and that supports the achievement of a specific goal.

**Strategy** – the course of action taken to achieve stated results. Strategies are made up of our best thinking about what works.

**Systems Change** – refers to all efforts that are tangibly supporting changes in systems and administrative practices toward shared leadership, shared responsibility, shared funding and resources, shared mission and values, and common results. Shared values would include: sensitivity and inclusion of diversity (ability, culture, class, geography, etc.); building on assets; family centered; customer driven; integration of services; and investment in prevention.

**Travel Augmentation** – is any travel augmentation your commission has received (or has designated as receivable) from the State Commission.

**Unallocated Fund Balance** – is the amount of funds in your fund balance that have not been reserved or committed for a specific future purpose. This amount should equal the Fund Balance minus the Balance in Reserve/Committed.